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FROM: Quan L. Nguyen TIMEKEEPER NO.: 2350
SENDER'S PHONE: 215.665.2158 SENDER'S FAX: 215-665-2013
OF PAGES (INCLUDING COVER): 19 FILE NAME: ALLE0050-100
DATE: Mar 3/06 FILE #: 179370

RECIPIENT(S)	EXAMINER	FAX
U.S. Patent Office	Vanessa L. FORD	571-273-8300

Docket No. 17679 (BOT) ALLE0050-100 / 179370

In re application of Catherine C. Turkel, et. al

Serial No.: 10/789,180 Filed: February 26, 2004

For: Methods For Treating Pain And For Treating Medication Overuse Disorder

Group Art Unit: 1645 Confirmation No.: 9912

Attached please find:

- Transmittal Form (1 page)
- Fee Transmittal (2 pages)
- Petition for (2-month) Extension of Time (2 pages)
- Request For Reconsideration (13 pages)

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TRANSMITTAL FORM		Application Number	10/789,180
(to be used for all correspondence after initial filing)		Filing Date	February 26, 2004
		First Named Inventor	Catherine C. Turkel, et al.
		Art Unit	1645
		Examiner Name	FORD, Vanessa L.
Total Number of Pages in This Submission	1	Attorney Docket Number	17879 (BOT)

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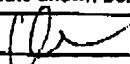
ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (2-mo) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer for 6,623,742 <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Cozen O'Connor		
Signature			
Printed Name	Quan L. Nguyen		
Date	March 3/06	Reg. No.	46,957

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Quan L. Nguyen
Date	Mar 3/06

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Effective on 12/08/2004.
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FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 450.00

Complete If Known	
Application Number	10/789,160
Filing Date	February 26, 2004
First Named Inventor	Catherine C. Turkel, et al.
Examiner Name	Vanessa L. FORD
Art Unit	1645
Attorney Docket No.	17670 (BOT)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Nonc Other (please identify) :

Deposit Account Deposit Account Number: 50-1275

Deposit Account Name: Cozen O'Connor

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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Under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) 50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
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-20 or HP= — X — = —

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP= — X — = —

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = — / 50 = — (round up to a whole number) X

= —

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : —

- Petition for Extension of Time (2 month)

—
\$450.00

SUBMITTED BY

Signature	(L)	Registration No. (Attorney/Agent)	48,957	Telephone	215-685-2158
Name (Print/Type)	Quan L. Nguyen	Date	Mar 3/06		

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481R).

**FEE TRANSMITTAL
for FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 450.00)

Complete If Known

Application Number	10/769,180
Filing Date	February 26, 2004
First Named Inventor	Catherine C. Turkel, et al.
Examiner Name	Vanessa L. FORD
Art Unit	1645
Attorney Docket No.	17679 (BOT)

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify) : Deposit Account Deposit Account Number: 50-1275

Deposit Account Name: Cozen O'Connor

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s)
Under 37 CFR 1.16 and 1.17 Credit any overpayments

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<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEESFee Description

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Small EntityFee (\$)

50 25

Each independent claim over 3 (including Reissues)

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Total Claims Extra Claims Fee (\$) Fee Paid (\$)Multiple Dependent Claims

-20 or HP= — x — = —

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)Fee (\$)

Fee Paid (\$)

- 3 or HP= — x — = —

HP = highest number of independent claims paid for, if greater than 3.

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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = —	/ 50 = —	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge) : —

- Petition for Extension of Time (2-month)

\$450.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	46,857	Telephone	215-685-2158
Name (Print/Type)	Quyen L. Nguyen			Date	Mar 31/06

This collection of information is required by 37 CFR 1.136. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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